

Bryan Kiwanis Club  
Revolving Scholarship

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Address: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Name of Institution you plan to attend: \_\_\_\_\_

Explain your financial need in regards to attending college:

Please list high school and community activities:

Statement of career ambition: Include the training you will need and any long-range goals.

G.P.A: \_\_\_\_\_

Class Rank: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_